

09-832867

POSITION	INITIAL	ID NO.	DATE
FEE DETERMINATION	Y		
O.L.P.E. CLASSIFIER		59	5/4/
FORMALITY REVIEW	MD	579	6/8/01
RESPONSE FORMALITY REVIEW			

INDEX F CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet her

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